REQUEST FOR PROTECTION ON TRIAL LIST

TO:					
	_	Name and Address of C	ourt:		
	-				
	_				
RE:					
	D	ocket Number and Case Docket No:	Name:		
REQ	UEST	OF: DPLAINT	TIFF		
This of	case i	s scheduled for trial list s' good faith credible est	beginning:imate of the time required for	the trial is	 days.
The f	ollow	ving requests for protecti	on from trial are made for the	e following reasons:	
		Dates(s) Requested	RE	ASON(S)	
	1.				
	2.				
	3.				
	4.				
	5.				
	6.				
Date:					
			[Attorney for]	☐ Plaintiff ☐ Def	fendant
THE SCHI	REQ EDUI	UEST IS CHECKED (LING CONFLICT WIT	N IS ALLOWED <u>ONLY IF</u>). A DISALLOWED REQ H ANOTHER COURT MA AT THE CONFLICT WILL	QUEST THAT RELA Y BE RECONSIDE	TES TO A RED IF IT
Date:					
				Judge/Justice	

DO NOT DOCKET